

# TOWN OF SPRINGFIELD

ESTIMATED COST OF PROJECT: \_\_\_\_\_  
BUILDING PERMIT FEE: \_\_\_\_\_  
CHECK/CREDIT CARD/CASH: \_\_\_\_\_

DATE OF PAYMENT: \_\_\_\_\_

## BUILDING PERMIT APPLICATION

BUILDING PERMIT #: \_\_\_\_\_  
APPLICATION DATE: \_\_\_\_\_  
APPLICANT NAME: \_\_\_\_\_ owner/contractor/agent/tenant/other  
APPLICANT SIGNATURE: \_\_\_\_\_ phone number: \_\_\_\_\_  
OWNER NAME: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
PHYSICAL ADDRESS: \_\_\_\_\_  
CELL NUMBER: \_\_\_\_\_ EMAIL: \_\_\_\_\_

Physical ADDRESS OF PROJECT: \_\_\_\_\_  
LEGAL DESCRIPTION OF PROJECT: \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Block: \_\_\_\_\_ Lot: \_\_\_\_\_  
or Metes N Bounds \_\_\_\_\_  
Lot dimensions: \_\_\_\_\_ x \_\_\_\_\_ = \_\_\_\_\_ acres (or ) \_\_\_\_\_ sq ft \_\_\_\_\_ survey attached

DATE TO BEGIN CONSTRUCTION: \_\_\_\_\_

CLASSIFICATION OF CONSTRUCTION	_____	SFR	_____	COMM	_____	Industrial/other
_____ house	_____ porch	_____ carport	_____	_____ manufactured home	_____	_____ modular
_____ addition	_____ storage	_____ shed	_____	_____ mobile home	_____	_____ remodel
_____ accessory unit	_____ deck	_____ garage	_____	_____ tiny home	_____	_____ fence
		_____ attached/detached				_____ other/demo

SIZE OF BUILDING	_____	construction materials:	_____ wood	_____ metal
NUMBER OF ROOMS	_____		_____ stucco	_____ concrete
# of STORIES	_____		_____ siding	_____ log
Building Height	_____	<div>heat/air conditioning: _____ boiler _____ electric _____ forced air _____ radiant _____ gas _____ central air _____ fireplace _____ geothermal _____ swamp cooler _____ wood stove _____ space heater _____ hot water baseboard</div>		
Height of Basement	_____ (cellar)			
Height of 1st level	_____			
Height of 2nd level	_____			
Foundation	_____ wood/block/cement/other			
STYLE OF ROOF	_____ gable/flat/pitched/other			_____ bath
ROOF MATERIAL	_____ metal/asphalt shingle/other			_____ kitchen

Manufacturer Name: \_\_\_\_\_  
address: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Contact name: \_\_\_\_\_

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BUILDING PERMIT #:

WATER SERVICE:	TYPE	_____	SIZE	_____	officer initial	_____
SEWER SERVICE:	TYPE	_____	SIZE	_____	officer initial	_____
ELECTRIC SERVICE:	TYPE	_____	SIZE	_____	officer initial	_____
GAS SERVICE:	TYPE	_____	SIZE	_____	officer initial	_____

LOCATION ON THE PROPERTY \_\_\_\_\_

SET BACKS: (shortest distance from lot lines) \_\_\_\_\_

front yard: _____	N,E,S,W side yard: _____	drawing/
rear yard: _____	N,E,S,W side yard: _____	survey attached _____

Include these documents: photos, side view, front view, building plans, floor plan, foundation plan

\_\_\_\_\_  
HOMEOWNER/BUILDER

ARCHITECT

Mailing address: \_\_\_\_\_  
cell number \_\_\_\_\_  
phone number \_\_\_\_\_

CONTRACTOR

Mailing address: \_\_\_\_\_  
cell number \_\_\_\_\_  
phone number \_\_\_\_\_

SUB-CONTRACTORS:

ELECTRICIAN

Mailing address: \_\_\_\_\_  
cell number \_\_\_\_\_  
phone number \_\_\_\_\_

PLUMBER

Mailing address: \_\_\_\_\_  
cell number \_\_\_\_\_  
phone number \_\_\_\_\_

**Inspections to be conducted:** The permit and plans must be at the site during the inspections.

_____ foundation	_____ State electrical	_____ drywall/finish
_____ framing	_____ State plumbing	_____ roof/snow load

\_\_\_\_\_  
*Certificate of Occupancy*

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BUILDING PERMIT #:

Asbestos: I hereby certify that this project will not disturb asbestos above the trigger levels. \*Asbestos report required as per

I do not know if an inspection has been conducted

An asbestos inspection has not been conducted

An asbestos inspection was conducted Date of inspection:

## AGREEMENT

The undersigned applicant hereby declares that he/she is the owner or agent of this proposed structure and that the accompanying plans and specifications for the erection of the structure for which this permit is issued are drawn in accordance to and comply with the ordinances of the Town of Springfield. -MUNICODE CHAPTER 16-ZONING

I certify that all answers contained in this application are true and correct to the best of my knowledge and further agree to comply with all laws and regulations of the State of Colorado and the Town of Springfield. ANY VIOLATION OF THE BEFORE MENTIONED CODES, RULES AND REGULATIONS SHALL RESULT IN AN IMMEDIATE REVOCATION OF THIS PERMIT. OR The applicant agrees to comply with Springfield Municipal Code, Chapter 16 by which this permit is granted, and further agrees that if the above said ordinances are not fully complied with, the permit will be revoked by the Town of Springfield, and shall become null and void. Construction will cease.

APPLICANT

date

BUILDING INSPECTOR

date

ISSUING OFFICER

date

Phone: (719) 523-4528

Fax: (719) 523-6956

<https://townofspringfield.colorado.gov>

This space is department use only:

Property is zoned:

Variance from the Board

APPROVED:

Special Use Permit

DISAPPROVED

other

INSPECTOR COMMENTS:

REVIEW COMPLETED BY:

DATE: